

## **EARLY INTERVENTION BIRTH TO THREE SERVICES FOR CHILDEN #DSD009a SCREENING AND EVALUATION**

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### **RFP Specifications/Scope of Work**

This request for proposal is specific to the performance of Service Coordination along with intake activities including Developmental Screening and Evaluation of children diagnosed or suspected of having a developmental delay and/or disability. Screening and evaluation of children may encompass screening of children who have been identified under the Child Abuse Prevention and Treatment Act. (CAPTA) The agency who successfully completes the RFP Process will demonstrate that they have knowledge and/or experience with home based early intervention service provision to young children and their families. In addition the proposal will provide evidence of a commitment to serving and being responsive to both lingual and ethnic diversity that encompasses Milwaukee County.

### **Service Structure**

#### **Screening & Evaluation & Ongoing Services**

Milwaukee County DSD Children's Program Birth to 3 Early Intervention contracts out services within the county Birth to 3 structure. Including ongoing services, screening and evaluation. Proposers interested in providing screening and evaluation services will need to submit a separate proposal specific to Screening and Evaluation as detailed below. Proposers interested in ongoing service provision will need to submit a separate proposal specific to ongoing service provision.

### **Service Coordination, Screening & Evaluation**

#### **Service Coordination Activities**

All families participating in the Birth to 3 Early Intervention Program will have an Assigned service coordinator or primary coach who schedules and arranges the evaluation(s), assessment, and development of the Individualized Family Services Plan (IFSP).

### **Screens**

Developmental screening is an essential aspect of the Birth to 3 Program. In partnership with families screening of children suspected or diagnosed with a developmental delay is performed using a screening instrument. Agencies may perform screenings from children referred to the program under the Child Abuse Prevention and Treatment Act as well as from parents themselves or other community sources.

## **Evaluations**

The evaluation team must include a service coordinator and at least two qualified Professionals. The team will participate in review of existing screens, evaluations, and reports; perform additional evaluations necessary.

## **Individual Family Service Plan Development**

The development of the IFSP. The IFSP must be created within 45 days of the date of the referral.

## **Service Models: Primary Coach Approach to Teaming**

Services/therapies should be designed to meet the family's needs, schedule, and their priorities regarding their child's development. All agencies must describe in their application how their program design will provide services/therapies within the context of the child and family's daily routine and home. Agencies applying to provide early intervention services must submit a written submission identifying their readiness and ability to provide services using the Primary Coach Approach to Teaming method. Submissions should address how the model would be implemented in their program as well as any challenges and opportunities specific to implementation. A timetable for proposed implementation should be included as well.

The program description must include completion of a fidelity checklist including procedures to monitor the delivery of services, to support direct staff, and to guide staff in the implementation of services/therapies for the family and child.

## **Natural Environments**

The core values of Birth to 3 emphasize that services to children are to be provided within the context of the family ensuring that parents are partners in any activity that serves their child.

Programs that also provide child care must ensure that services/therapies provided within a natural environment do not overlap with child care services.

## **I. Early Intervention Birth to 3 Program Requirements**

1. Comply with all Milwaukee County Department of Health and Human Services Disabilities Services Division Birth to 3 Early Intervention Program and DHS 90 Early Intervention requirements related to evaluation(s), eligibility determination, development and implementation of the IFSP, service coordination, obtaining and maintaining information, providing written prior notice to parents, and ensuring parental safeguards are maintained.
2. Make available appropriate qualified staff for evaluations of children assigned by the Milwaukee County DSD Children's Program. Staff must meet the personnel and training requirements of DHS 90.
3. Make available appropriate and qualified staff for the provision of activities/therapies to families and children within the context of the family's daily

routines and the child's home environment and as appropriate natural environment.

**(Activities vary for screening and evaluation and ongoing services)**

4. Make available appropriate qualified staff to provide service coordination, to document, monitor and maintain the IFSP with the family.  
Service Coordinators are required to participate in at least 5 hours of training each year related to early intervention. Service Coordinators should also be knowledgeable and have access to information about community resources for children and families.
  - a. Service Coordinators will participate in at least one training provided by the county in a contract year.
5. Make documented efforts to ensure diversity in staff that is reflective of the community and populations participating in early intervention programs.
6. Comply with guidelines for family participation in evaluations, IFSP development, and provision of services/therapy delivery in the natural environment.
7. Review the IFSP with the family every six months and ensure that the information in the IFSP is accurate, properly documented, current, and complete.
8. Comply with the guidelines and requirements for transition of children out of the Birth to 3 program:
  - a. The child is no longer in need of early intervention,
  - b. The child is leaving the program because of age,
  - c. The child is transferring or moving out of state, or
  - d. Other transition.
9. Comply with the referral process and requirements written in the DSD interagency agreement with local education agencies and out of county agencies.
10. Provide a representative to receive referrals for the agency
11. Provide billing procedures to ensure that third-party revenues are maximized and that the Birth to 3 Parental Cost Share System is implemented and reported as required.
12. Have adequate written information available for non-English speaking families, e.g., program descriptions, primary policies, and guidelines for participants.
13. Enter all child data timely into the state and county information management systems. Utilize the reports and functions supplied to remain compliant with proscribed indicators.
14. Enter Child Outcomes entry and exit data timely.
15. Participate in Milwaukee County quarterly review and monitoring meetings.
16. Maintain complete Milwaukee County Birth to 3 records of children participating in the Birth to 3 Program.  
Follow all record maintenance requirements and provided copies of documents in the file as requested when written proper release is obtained. Complete records of a child's participation in Birth to 3 must be maintained and provided upon request to Milwaukee County
17. Participate in file review process as required and site visits from Milwaukee County.

18. Participate in Program Improvement Plan development yearly or as needed.
19. Notify Milwaukee County Birth to 3 Program, immediately of unresolved concerns or complaints regarding the delivery of Birth to 3 services with parents or partner agencies.
20. Participate in other quality improvement activities as required.

## **II. Program Performance Data and Monitoring**

Birth to 3 is a special education program provided under the authority of the. The Office of Special Education Programs (OSEP) in the U.S. Department of Education. There are a number of benchmarks along with performance and results indicators that programs must meet in an ongoing manner. The Milwaukee County Birth to 3 Program is required to produce results for children with disabilities as well as be compliant with federal special education timelines and required service activities.

### **Agency Reporting**

On a semi-annual basis, each agency must provide a narrative report to Milwaukee County.

1. The semi-annual report is due by the last business day of July details of what must be included will be provided.

and must include.

a. List of training activities provided for service coordinators. Attach an agenda sheet that records information covered and a signature sheet documenting the list of participants.

i. Note challenges in providing the training if they exist.

ii. List training you believe would benefit your staff that the county or state could provide.

b. Include a spreadsheet that identifies those children with whom your agency failed to meet compliance. Ensure that a reason is given for each case and explain efforts your agency will make or has made to correct this in the future.

2. Annual report is due to Milwaukee County on or before the 14th business day of January for the previous year. Report requirements will be provided.

### **Reporting Program Units of Service**

**Direct service time** is staff time spent in providing services to the program participants, which includes face-to-face contacts (office or field), collateral contacts, telephone contacts, client staffing, and time spent in documentation of service provisions. Direct service does not include indirect time such as that spent at staff meetings, in service training, vacations, etc.)

**Collateral contacts** are face-to-face or telephone contacts with persons other than the program participants, who are directly related to providing services to those participants,

and need to be involved by virtue of their relationship to the program participant. Collateral contacts could include contacts with family members, other service providers, physicians, school personnel, clergy, etc.

**For all agencies, a unit of service is one-quarter hour (.25) of direct service time.**

Reimbursement for group services is based on one-hour units of direct service time.

The total time must be equally divided among the group participant and recorded in case records of each participant.

**Documentation**

Direct service time must be documented through an entry in the case notes or narrative for units billed. The case narrative must be contained in the case record maintained by the agency. The narrative entry must include:

1. The date of the contact,
2. The type of contact (fact-to-face, phone, email, etc.),
3. Who the contact was with,
4. The content of the contact, and
5. The number of units (the length of contact).

**Screens**

Screens will be paid at \$150.00 per completed screen.

**III. Program Volumes**

Annualized volumes:

Screens: 460

Evaluations: 180